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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

P | 2007 PORSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076 Expires: March 30, 2008 Estimated average burden hours per form......1

SEC USE ONLY								
Prefix Serial								
DATE RECEIVED								

	tes and the underlying shares of capita	ai stock of	ine issuer				
filing Under (Check box(es) that ap	ply): 🔲 Rule 504		Rule 505	🗷 Rule 506		☐ Section 4(6)	☐ ULOE
ype of Filing:		⋉ Ne	v Filing			Amendment	
	A. BASI	IC IDENT	IFICATION DA	TA		_	
. Enter the information requested	l about the issuer						
lame of Issuer (☐ check if this is a	n amendment and name has changed	, and indic	ite change.)		_		
Pivot3, Inc.							
Address of Executive Offices	(Number and St	reet, City,	State, Zip Code)	Telephone Nu	mber (l) E
605 Cypresswood Drive, Suite 350	, Spring, Texas 77379			(281) 516-600)	0707	1161
Address of Principal Business Opera f different from Executive Offices)	ntions (Number and Street, City, State	e, Zip Code)	Telephone Nu	mber (lı.		
ame				PECEU			
Brief Description of Business			,) U L C	,			
lesearch and development of semic	onductor and software solutions		- SED	1 4 2007			
Type of Business Organization			اعات	1 1 2001	_		
corporation	☐ limited partnership, alread	y formed	THO	mson L	□ c	ther (please specify);
business trust	☐ limited partnership, to be i	formed		MCIAL			
		Month	-	ear			
actual or Estimated Date of Incorpo	ration or Organization;	11	0	2	_	ctual 🗆	1 Estimated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner						
Full Name (Last name first, if individual) Caswell, Lee											
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Pivot3, Inc., 6605 Cypresswood Drive, Suite 350, Spring, Texas 77379											
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner						
Full Name (Last Eggers, Barry	name first, if individual)										
	idence Address (Number and S Venture Partners, 2200 Sand H	Street, City, State, Zip Code) ill Road, Menlo Park, CA 9402.	5								
Check Boxes that Apply:	☐ Promoter	■ Beneficial Owner ■ Compare the second of the second o	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner						
O'Brien, Eric	name first, if individual)										
	idence Address (Number and S Venture Partners, 2200 Sand H	street, City, State, Zip Code) ill Road, Menlo Park, CA 9402	5								
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner						
Westerlind, Vict											
	idence Address (Number and S intners, 2710 Sand Hill Rd., 2 ^{nc}	treet, City, State, Zip Code) Floor, Menlo Park, CA 94025									
Check Boxes that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner						
Nash, Ronald	name first, if individual)										
c/o InterWest Pa	idence Address (Number and S rtners, 2710 Sand Hill Rd., 2 nd	treet, City, State, Zip Code) Floor, Menlo Park, CA 94025									
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner						
Galloway, Willia											
	dence Address (Number and S 6605 Cypresswood Drive, Sui										
Check Boxes that Apply:	Promoter	■ Beneficial Owner ■ Compare the second of the second o	☐ Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual) Entities affiliated with Lightspeed Venture Partners											
Business or Residence Address (Number and Street, City, State, Zip Code) 2200 Sand Hill Road, Menlo Park, CA 94025											
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner						
Full Name (Last name first, if individual) Entities affiliated with InterWest Partners											
Business or Res	dence Address (Number and										
2710 Sand Hill Rd., 2 nd Floor, Mento Park, CA 94025											

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)												
Callison, Ryan												
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Pivot3, Inc., 6605 Cypresswood Drive, Suite 350, Spring, Texas 77379												
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner							
Full Name (Last name first, if individual) Fernander, Robert												
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Pivot3, Inc., 6605 Cypresswood Drive, Suite 350, Spring, Texas 77379												
Check Boxes that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner							
	name first, if individual)											
Skidmore, Alan												
	idence Address (Number and S Oak Way, Spring, Texas 773		,									
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner							
Full Name (Last name first, if individual) Palis, Glenn												
	idence Address (Number and 6605 Cypresswood Drive, Su											
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner							
Full Name (Las Bell, Jeffrey	name first, if individual)											
	idence Address (Number and 6605 Cypresswood Drive, Su											
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner							
Full Name (Las Gluck, Mike	name first, if individual)											
	idence Address (Number and 6605 Cypresswood Drive, Su											
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner							
Full Name (Las	name first, if individual)				,							
Business or Residence Address (Number and Street, City, State, Zip Code)												
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner							
Full Name (Las	name first, if individual)	,,										
Business or Res	idence Address (Number and	Street, City, State, Zip Code)										

	B. INFORMATION ABOUT OFFERING												
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?													
2.	What is the minimum investment that will be accepted from any individual?												
3.	Does the offering permit joint ownership of a single unit?												
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A													
Full Name (Last name first, if individual)													
Bus	iness or Res	idence Addı	ress (Number	and Street,	City, State,	Zip Code)							-
Nan	ne of Associ	ated Broker	or Dealer									·	
			ed Has Solic						<u> </u>				—
(Ch	eck "All Sta	tes" or chec	k individual	States)									
AL	.l	[AK]	[AZ]	[AR]	[CA]	[CO]	ICTI	[DE]	[DC]	FL	[GA]	lHil	[ID]
ΙΙLΙ		INI	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	IMII	[MN]	[MS]	[MO]
JM7	r ı	[NE]	INVI	INHI	ונאן	[NM]	[NY]	INCI	[ND]	ЮН	JOK J	[OR]	[PA]
[RI]		[SC]	[SD]	JTNJ	JTXJ	IUTI	ĮVTĮ	[VA]	[VA]	ΙWVΙ	[WI]	JWYJ	[PR]
Full	Name (Last	name first,	if individual)									
	<u> </u>												
Bus	iness or Res	idence Addi	ress (Number	r and Street,	City, State,	Zip Code)							.
Nan	ne of Associ	ated Broker	or Dealer				•						
Stat	es in Which	Person List	ed Has Solic	ited or Inten	ds to Solici	t Purchasers							
(Ch	eck "All Sta	tes" or chec	k individual	States)									All States
[AL	ŀ	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IN]	[IA]	{KS	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	ΓJ	INE	INVI	[NH]	ונאן	INMI	[NY]	[NC]	INDI	ЮН	JOK J	[OR]	[PA]
(RI)		[SC]	[SD]	[TN]	[TX]	(UT)	ĮVTJ	[VA]	[VA]	ĮWVΙ	ĮWIJ	[WY]	[PR]
Full	Name (Last	name first,	if individual)			···						
Business or Residence Address (Number and Street, City, State, Zip Code)													
Nan	ne of Associ	ated Broker	or Dealer				·		<u> </u>				
Stat	es in Which	Person List	ed Has Solic	ited or Inten	ds to Solici	t Purchasers	;						
(Check "All States" or check individual States)													
JAL.	1	[AK]	[AZ]	[AR]	[CA]	[CO]	ICT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[!L]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
JM7	ΓΙ	[NE]	INVI	INHI	ונאן	[NM]	[NY]	[NC]	INDI	ЮНЈ	[OK]	[OR]	[PA]
IRII		ISCI	ISDI	ITNI	ITXI	IUTI	ivri	IVAL	IVAL	IWVI	fWII	IWYI	(PRI

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." transaction is an exchange offering, check this box 🗆 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Type of Security Aggregate Offering Price Sold 0 Debt 0 Equity Common Preferred Convertible Securities (including warrants)..... \$ 5,000,000 5,000,000 0 Partnership Interests..... Other (Specify ____ 0 Total..... \$ __5,000,000 5,000,000 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate **Dollar Amount** Investors of Purchases Accredited Investors 5,000,000 0 Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. N/A Type of **Dollar Amount** Security Sold Type of Offering Rule 505..... Regulation A Rule 504..... Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs X 10,000 Legal Fees Accounting Fees Engineering Fees. Sales Commissions (specify finders' fees separately) Other Expenses (Identify)

Total.....

Ø

10,000

C. OFFERING PRICE, NUMBER OF	INVESTORS, EXPENSES AND	USE OF PROCEEDS		
 Enter the difference between the aggregate offering price given in in response to Part C - Question 4.a. This difference is the "adjust 			\$ 4,990,000	
 Indicate below the amount of the adjusted gross proceeds to the issuer if the amount for any purpose is not known, furnish an estimate and payments listed must equal the adjusted gross proceeds to the issuer set 	check the box to the left of the	estimate. The total of the		
		Payment to Officers,	Payment To	
		Directors, & Affiliates	Others	
Salaries and fees		□ s	□ s	
Purchase of real estate	***************************************	□ s	□ s	
Purchase, rental or leasing and installation of machinery and equipment		□ s	□ s	
Construction or leasing of plant buildings and facilities	***************************************	O s	□ s	
Acquisition of other businesses (including the value of securities involved in exchange for the assets or securities of another issuer pursuant to a merge	<u> </u>	<u></u>		
Repayment of indebtedness		□ s	<u> </u>	
Working capital		□ s	\$4,990,000	
Other (specify):	•	□ s	🗆 s	
		□ s		
Column Totals		□ s		
Total Payments Listed (column totals added)	***************************************	X \$4,990,000		
		*		
D. COL	SEDAL CLOSE TRIBE			
	DERAL SIGNATURE			
The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange (non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	authorized person. If this notice i Commission, upon written request	s filed under Rule 505, the of its staff, the information	following signature constitutes furnished by the issuer to any	
Issuer (Print or Type)	Signature	/	Date	
Pivot3, Inc.	11312		August 30 2007	
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
Robert Fernander	President and Chief Executive (Officer		



ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)